


UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	P9538
	First Inventor	Charles R. Hellier
	Title	PROACTIVE POLICY-DRIVEN SERVICE PROVISIONING FRAMEWORK
	Express Mail Label No.	EV331754052US

22386 U.S. PTO
 10/715991

 111803

APPLICATION ELEMENTS	Mail Stop Patent Application Commissioner for Patents Alexandria, VA 22313-1450
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- | | |
|---|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form
<small>(submit an original and a duplicate for fee processing)</small>
2. <input type="checkbox"/> Applicant claims small entity status.
<small>See 37 CFR 1.27</small>
3. <input checked="" type="checkbox"/> Specification [total pages <u>22</u>]
<small>(preferred Arrangement set forth below)</small>
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a
computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
4. <input checked="" type="checkbox"/> Drawing(s) [total sheets <u>4</u>]
5. <input checked="" type="checkbox"/> Oath or Declaration [total pages <u>2</u>]
a. <input checked="" type="checkbox"/> Newly executed (original or copy)
b. <input type="checkbox"/> Copy from prior appl. (37 C.F.R. § 1.63(d))
<small>(for continuation/divisional with Box 18 completed)</small>
i. <input type="checkbox"/> DELETION OF INVENTOR(S)
<small>Signed statement attached deleting
 inventor(s) named in prior application,
 see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small> | 6. <input type="checkbox"/> Application Data Sheet. (See 37 CFR 1.76)
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table
or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
<small>(if applicable, all necessary)</small>
a. <input type="checkbox"/> Computer Readable Form
b. <input type="checkbox"/> Specification Sequence Listing on:
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
ii. <input type="checkbox"/> paper
c. <input type="checkbox"/> Statements verifying identity of above copies |
|---|---|

ACCOMPANYING APPLICATION PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (coversheet/document(s))	
10. <input type="checkbox"/> 37 CFR. 3.73(b) Statement <small>(when there is an assignee)</small>	<input checked="" type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document	
12. <input type="checkbox"/> IDS & Form PTO/SB/08A	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s)	
16. <input type="checkbox"/> Nonpublication Request Under 35 USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35	
17. <input checked="" type="checkbox"/> Other: Certificate of Mailing	

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: /

Prior application information: Examiner: _____ Group/Art Unit: _____

FOR CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **32658** or Correspondence address below

Name			
Address			
City	State	ZIP	
Country	Telephone	Fax	

Name (Print/Type)	William J. Kubida	Registration No.	29,664
(Signature)		Date	18 November 2003

18379 U.S. PTO
11803

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p><i>Complete if Known</i></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td>Herewith</td></tr> <tr><td>First Named Inventor</td><td>Charles R. Hellier</td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Art Unit</td><td></td></tr> <tr><td>Attorney Docket No.</td><td></td></tr> </table>		Application Number		Filing Date	Herewith	First Named Inventor	Charles R. Hellier	Examiner Name		Art Unit		Attorney Docket No.	
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<p>TOTAL AMOUNT OF PAYMENT (\$) 810</p>															

<p>METHOD OF PAYMENT (check all that apply)</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None Order</p> <p><input type="checkbox"/> Deposit Account:</p> <p>Deposit Account Number: <input type="text" value="50-1123"/></p> <p>Deposit Account Name: <input type="text" value="Hogan & Hartson LLP"/></p> <p>The Director is authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments</p> <p><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>				<p>FEE CALCULATION (continued)</p>																																																																																																																																																																																																																																															
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<p>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</p> <p>Total Claims: <input type="text" value="20"/> -20 ** = <input type="text" value="0"/> X <input type="text" value="0"/> = <input type="text" value="0"/></p> <p>Independent Claims: <input type="text" value="3"/> -3 ** = <input type="text" value="0"/> X <input type="text" value="0"/> = <input type="text" value="0"/></p> <p>Multiple Dependent: X <input type="text" value="0"/> = <input type="text" value="0"/></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: center;">(\$) 0</td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$) 0																																																																																																																																																																																																		
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SUBMITTED BY		<i>Complete (if applicable)</i>			
Name (Print/Type)	William J. Kubisa	Registration No. (Attorney/Agent)	29,664	Telephone	719-448-5909
Signature				Date	14 November 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Charles R. Hellier

Serial No. NEW

Filed: Herewith

For: PROACTIVE POLICY-DRIVEN
SERVICE PROVISIONING FRAMEWORK

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The undersigned hereby certifies that the following documents:

1. Utility Patent Application Transmittal;
2. Fee Transmittal with \$770 filing fee;
3. Utility Patent Application;
4. Executed Combined Declaration and Power of Attorney;
5. 4 sheets of drawings;
6. Recordation Form Cover Sheet PTO 1595 with Executed Assignment and Recording Fee of \$40.00;
7. Return postcard; and
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relating to the above application, were deposited as "Express Mail", Mailing Label No. EV331754052US, with the United States Postal Service, addressed to Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, 18 November 2003.

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